

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	(Dg)		7-17-01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 -+ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/1/01
2	✓	✓	7/1/01
3	✓	✓	7/1/01
4	✓	✓	7/1/01
5	✓	✓	7/1/01
6	✓	✓	7/1/01
7	0		
8	✓	✓	7/1/01
9	✓	✓	7/1/01
10	1	0	
11			
12	✓		
13	✓		
14	✓		
15	✓	>	7/1/01
16	✓	✓	
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18		✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here